



## State of Arizona

### Acupuncture Board of Examiners

1400 West Washington, Suite 230

Phoenix, AZ 85007

Telephone (602) 542-3095 • Fax (602) 542-3093

OFFICE USE ONLY

### PUBLIC INFORMATION REQUEST

This document represents the verified statement that \_\_\_\_\_ submitted  
(Name of requesting party)

to the State of Arizona Acupuncture Board of Examiners on \_\_\_\_/\_\_\_\_/\_\_\_\_, a request that the agency provide a copy or other reproduction of certain public records as specified below:

Specify records requested: (limit of 3 items per request)

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

Signature of requestor: \_\_\_\_\_ Daytime Phone # \_\_\_\_\_

Complete Address of Requestor:

E-Mail Address: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

These records will be used for: ☐ Commercial purposes ☐ Non-commercial purposes

(If records are to be used for commercial purposes, specifically state those purposes below.)

#### FOR STAFF USE ONLY:

Date Request Received:	Amount:	Check Number:	Receipt Number:

**PUBLIC INFORMATION 2014 FEE SCHEDULE:**

- |    |   |                                 |
|----|---|---------------------------------|
| 1. | Copies of records, documents, letters, minutes, applications and files: | 25 cents per page               |
| 2. | Copies of current year board meeting minutes:                           | \$25.00 for each set of minutes |
| 3. | Sale of lists and directories for commercial purposes:                  | \$60.00                         |